



5310 Call for Projects

Federal Section 5310 Enhanced Mobility of Seniors and
Individuals with Disabilities Program
Operational and Capital Funding
Fort Wayne Allen County Urbanized Area

Project Application Package

FFY 2025 5310 Funding

Posted On: 12/17/2025

Submit One Electronic (PDF) Application by (2/16/2026)

Issuing Office:

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5310 grant program.*

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Submit One Electronic (PDF) Application By (2/16/2026)

INTRODUCTION - Section 5310 Operational Funding

The purpose of this application package is to provide information, guidance and a format for completing a Section 5310 grant application request for operating and capital projects initiating in 1/1/2027 with operating funds being spent by 12/31/2027. Citilink requires applicants to use the format provided in this document when developing an application (the applicant must include the application checklist, relevant application, all attachments, and certifications). **Applicants must submit one electronic copy (pdf) of the grant application and all required documents. The application MUST be able to be emailed as one file containing the relevant application, checklist, all documentation, certifications, assurances, and the completed Requirements and Certifications section of the Call for Projects. If you are having technical difficulties submitting the application reach out to Citilink immediately for assistance or alternative submission methods.** Citilink must receive project applications no later than 4:00 PM (EST) on (2/16/2026). If submitting for both operational and capital projects, please complete both applications and submit an electronic copy of both applications as separate emails. Please submit applications to the email address below:

prr@fwcitilink.com

A grant application document referred to as the Section 5310 Capital Funding Application Template and the Section 5310 Operational Funding Application Template (with instructions) will be provided on Citilink's website at www.fwcitilink.com if assistance is required please contact prr@fwcitilink.com or 260-432-4546. The submitted application must be completed with all required documentation, certifications, data, and vehicle inventories attached at the end of the application as discussed in the application instructions section of the Call for Projects. **If you are unable to include your documentation and information in the Attachment section of your application; please combine the files with the completed application or email them as separate attachments when submitting the application, if needed, with your application name including organization name in the email.** If requesting funds for capital and operating projects both applications must be completed. **All answers should be clear, complete, and concise. Answers should be provided based upon the assumption that the audience is neither technically trained nor familiar with the project being proposed. All sections of the application must be completed to be eligible.** If further guidance is required applicants may request help by calling or emailing Patrick Rorick at prr@fwcitilink.com and 260-432-4546.

All applicants should thoroughly review all requirements listed in this call for projects to ensure their projects meet the eligibility criteria and requirements of this call for projects.

Available Funds

Capital Funding - Applicants (55% of total federal funding)	\$240,661
Operational Funding- Applicants (35% of total federal funding)	\$153,148
Program Administration - Citilink (10% of federal funding)	\$43,756
Total Funds Available	\$437,565

\$437,565 of Federal Fiscal Year (FFY) 2025 5310 funds are available for projects. As an attempt to meet the traditional funding requirements of the FTA, Citilink is making 55% of funds available for traditional 5310 projects (capital) and 45% of funds available for nontraditional 5310 projects (operational and program administration).

The Northeastern Indiana Regional Coordinating Council (NIRCC) has developed a Coordinated Public Transit-Human Services Transportation Plan for Allen County (see the NIRCC website plans section at <https://www.in.gov/nircc/>). The Fort Wayne Public Transportation Corporation (dba Citilink referred to as such through this document) is the designated recipient of the Section 5310 funds for the Fort Wayne Allen County Urbanized Area. Therefore, any project(s) selected for funding will require the responsible agency or party to enter into a contractual agreement with Citilink. Citilink is seeking eligible 1 year (12 month) operating projects and eligible capital projects initiating in 2027 that utilize Section 5310 Funding.

The Federal Transit Administration (FTA) requires the establishment of a locally developed, coordinated public transit-human services transportation plan for the FTA human service transportation program known as the Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilities Program. Section 5310 funds are available for capital and operating expenses to support the provision of transportation services to meet the specific needs of seniors and individuals with disabilities.

Citilink will select eligible projects to utilize Section 5310 Funding. **Trips from both capital and operational projects must serve the Urbanized Area (UZA) by having one (or more) of the following: starting in the UZA, the destination is in the UZA, or both starting and having the destination in the UZA.** A map of the urbanized area can be found in Appendix A, and the evaluation criteria can be found in Appendix B. All project applications must conform to the guidelines established by FTA funding under the Section 5310 program (applicant projects must document and show how they benefit enhanced mobility for seniors and individuals with disabilities). **All projects must address at least one (1) of the Section 5310 Operational strategies identified in the Coordinated Public Transit Human Services Transportation Plan for Allen County (Available at <https://www.in.gov/nircc/>).** Projects which do not qualify for funding will be eliminated from consideration.

A. Description of Section 5310 Operational Funding

Citilink awards Section 5310 operating assistance grants to help agencies provide transportation services for seniors and individuals with disabilities where accessible public transportation is not available, insufficient, or inappropriate. Citilink is currently seeking eligible operating assistance requests for projects within the Fort Wayne Urbanized Area (UZA) from eligible applicants. The requested operational funds must go toward operations within the UZA and meet at least one (1) of the Section 5310 Operational Funding strategies identified in the Coordinated Public Transit Human Services Transportation Plan for Allen County (<https://www.in.gov/nircc/>). All projects must conform to the guidelines established by FTA funding under the Section 5310 program. Projects and/or applicants who submit for operational funding and do not qualify for Section 5310 operational funding will be eliminated from consideration.

B. Description of 5310 Capital Funding

Citilink awards Section 5310 capital assistance grants to help agencies provide transportation services for seniors and individuals with disabilities where accessible public transit is not available, insufficient, or inappropriate. Citilink is currently seeking eligible capital equipment requests for the Fort Wayne Urbanized Area (UZA) from eligible applicants for the acquisition of equipment to provide specialized transportation to seniors and individuals with disabilities. The capital equipment requested must serve the urbanized area and address at least one (1) of the Section 5310 Capital Funding strategies identified in the Coordinated Public Transit Human Services Transportation Plan for Allen County (<https://www.in.gov/nircc/>). All projects must conform to the guidelines established by FTA funding under the Section 5310 program. Projects and/or applicants who submit for capital funding and do not qualify for Section 5310 Capital funding will be eliminated from consideration.

C. Application Timeline

(For Operation and Capital Applications)

Activity	Responsibility	Schedule
Issue Call for Projects	Citilink	<u>12/17/2025</u>
Distribute Applications	Citilink	<u>12/17/2025</u>
Applications Due	Citilink and Applicant	<u>2/16/2026</u>
Application Review	Citilink and Applicant	<u>2/17/2026</u>
Award Notification	Citilink	<u>Anticipated After April 2026 Board Meeting</u>
Execute Contracts	Citilink and Grantee	<u>After Grant approval from FTA (Anticipate Contracts End of 2026)</u>
Performance Reports and Invoices	Grantee	<u>Monthly/Quarterly</u>
Compliance Reviews	Citilink and Grantee	<u>Ongoing/Annual</u>
TIP Amendments	Citilink	<u>As Needed</u>

D. Eligible Recipients

There are three categories of eligible recipients of Section 5310 Operational Funds:

1. Private, non-profit corporations (incorporated in Indiana through the Secretary of State).
2. Eligible local public bodies (defined as a “municipal corporation” in Indiana Code 36-1-2-10) that either 1) are approved by INDOT to coordinate services for seniors and individuals with disabilities, or 2) certify to INDOT that no non-profit corporations are readily available to provide the proposed service. **Public bodies interested in submitting a grant application must contact Patrick Rorick at pr@fwcitilink.com immediately to request information and forms to determine eligibility.**
3. Operators of public transportation services, including private operators of public transportation services.

Citilink is requesting as part of this Call for Projects that applicants for capital funds be able to meet the traditional 5310 funding requirement of being a non-profit entity that provides transportation services to seniors and individuals with disabilities and meeting all 5310 requirements.

E. Eligible Activities

To be considered an eligible activity the project(s) must be derived from the Coordinated Public Transit-Human Services Transportation Plan for Allen County. Eligible activities include the following:

1. Operational Funding

Section 5310 Operational Funding must be used to cover the operating expenses of projects targeted toward meeting the transportation needs of seniors and individuals with disabilities. All projects must be derived from the Coordinated Public Transit Human Services Transportation Plan for Allen County and must address at least one (1) of the Section 5310 Operational strategies identified in the Plan to be eligible.

1. Public Transportation Projects that Exceed the Requirements of the ADA. The following activities are examples and should not be considered an exhaustive list of projects that are eligible in meeting the definition of public transportation service that is beyond the ADA
 - a. Enhancing paratransit beyond minimum requirements of the ADA.
 - i. Expansion of paratransit service parameters beyond the three-fourths mile required by the ADA;
 - ii. Expansion of current hours of operation for ADA paratransit services that are beyond those provided on the fixed-route services;
 - iii. The incremental cost of providing same day service;
 - iv. The incremental cost (if any) of making door-to-door service available to all eligible ADA paratransit riders, but not on a case-by-case basis for individual riders in an otherwise curb-to-curb system;
 - v. Enhancement of the level of service by providing escorts or assisting riders through the door of their destination;
2. Feeder services. Accessible “feeder” service (transit service that provides access) to commuter rail, commuter bus, intercity rail, and intercity bus stations, for which complementary paratransit service is not required under the ADA.
3. Public Transportation Projects that Improve Accessibility. The following activity is an example of an eligible project that improves accessibility to the fixed-route system.
 - a. Travel training. Training programs for individual users on awareness, knowledge, and skills of public and alternative transportation options available in their communities. This includes travel instruction and travel training services.
4. Public Transportation Alternatives that Assist Seniors and Individuals with Disabilities with Transportation. The following activities are examples and should not be considered an exhaustive list of projects that are eligible public transportation alternatives.

- a. Supporting the administration and expenses related to voucher programs for transportation services offered by human service providers. This activity is intended to support and supplement existing transportation services by expanding the number of providers available or the number of passengers receiving transportation services. Vouchers can be used as an administrative mechanism for payment of alternative transportation services to supplement available public transportation. The Section 5310 program can provide vouchers to seniors and individuals with disabilities to purchase rides, including: (a) mileage reimbursement as part of a volunteer driver program; (b) a taxi trip; or (c) trips provided by a human service agency. Providers of transportation can then submit the voucher for reimbursement to the recipient for payment based on predetermined rates or contractual arrangements. Transit passes or vouchers for use on existing fixed-route or ADA complementary paratransit service are not eligible. Vouchers are an operational expense which requires a 50/50 (federal/local) match.
5. Supporting volunteer driver and aide programs. Volunteer driver programs are eligible and include support for costs associated with the administration, management of driver recruitment, safety, background checks, scheduling, coordination with passengers, other related support functions, mileage reimbursement, and insurance associated with volunteer driver programs. The costs of enhancements to increase capacity of volunteer driver programs are also eligible. FTA encourages communities to offer consideration for utilizing all available funding resources as an integrated part of the design and delivery of any volunteer driver/aide program.

See FTA Circular 9070.1H “ENHANCED MOBILITY OF SENIORS AND INDIVIDUALS WITH DISABILITIES PROGRAM GUIDANCE AND APPLICATION INSTRUCTIONS”. A list of eligible items can be found on Page IV-5 and additional requirements and guidance can be found throughout the document.

2. Capital Funding

Capital funding is specifically for eligible capital equipment including low-floor mini-vans small, medium, and large transit vehicles. To be considered eligible an applicant requesting capital funding must be using the funds to purchase eligible capital items using capital funding. The capital funding is an 80/20 federal/applicant split. The applicant must have sufficient funds to purchase the vehicle and then be reimbursed for 80% of the cost. This is due to the federal program being a reimbursement method of funding where the grantee is reimbursed for eligible expenses up to the requested/stated dollar amount in the grant. Capital strategies listed in the Coordinated Public Transit – Human Services Transportation Plan include:

1. Maintain existing service/fleets

2. Maintain and increase coordination and efficiency between all transportation providers
3. Expand existing service/fleets
4. Increase public awareness of available services and programs offered by providers available to them

Eligible capital equipment for this call for projects includes low floor mini-vans and small/medium/large transit vehicles. Approximate delivery time of vehicles varies but can be approximately 6-12 months from the order date. Section 5310 funds cover 80% of capital cost. The remaining 20% of the funds are from the grantee.

Eligible equipment under this Section 5310 program and call for projects include:

1. Low floor minivan and small/medium/large transit vehicles, including accessibility modifications, such as raised roof, lowered step, wheelchair lift and wheelchair securement devices.
2. **The vehicle must be purchased from the Indiana State Contract called the Quantity Purchase Agreement (QPA).**
3. When planning for the price of vehicle purchases the applicant must factor in inflationary factors and be able to document that they have the capital on hand to pay for any cost increases with local match (applicant funds).

Vehicles must meet all FTA 5310 requirements.

See FTA Circular 9070.1H “ENHANCED MOBILITY OF SENIORS AND INDIVIDUALS WITH DISABILITIES PROGRAM GUIDANCE AND APPLICATION INSTRUCTIONS”. A list of eligible items can be found on Page IV-2, and additional requirements and guidance can be found throughout the document.

F. Federal/Local Matching Requirements

1. Operational Funding Local Match Requirements

The portion of funds that the grantee contributes to the project is referred to as local funds and/or local matching funds. For operational funding the local match must be (a minimum of) fifty percent (50%) of the project meaning that the project would be a 50/50 split between federal and local matching funds. The applicant must document that the local matching funds are available.

The federal share (or federal portion) of the eligible operating costs may not exceed 50 percent of the net operating costs of the activity. The local share (or local match) of eligible operating costs shall be not less than 50 percent of the net operating costs. The local share may be provided from an undistributed cash surplus, a replacement or depreciation cash fund or reserve, a service agreement with a state or local service agency or private social service organization, or new capital. Some examples of these sources of local match include state or local appropriations; dedicated tax revenues; private donations; revenue from service contracts; transportation development credits; and net income generated from

advertising and concessions. Non-cash local match such as donations, volunteered services, or in-kind contributions is eligible to be counted toward the local match as long as the value of each is adequately documented and supported, represents a cost which would otherwise be eligible under the program, and is included in the net project costs in the project budget. **All match sources with their available funds must be documented as an attachment to the end of the submitted application.**

Income from contracts to provide human service transportation may be used either to reduce the net project cost (treated as revenue) or to provide local match for Section 5310 operating assistance. In either case, the cost of providing the contract service is included in the total project cost. No FTA program funds can be used as a source of local match for other FTA programs, even when used to contract for service.

In addition, the local match may be derived from federal programs that are eligible to be expended for transportation, other than DOT programs, or from DOT's Federal Lands Highway program. Examples of types of programs that are potential sources of local match include: employment, training, aging, medical, community services, and rehabilitation services.

2. Capital Funding Local Match Requirements

The portion of funds that the grantee contributes to the project is referred to as local funds and/or local matching funds. For capital funding the local match must be (a minimum of) twenty percent (20%) of the project meaning that the project would be an 80/20 split between federal and local matching funds. The applicant must document that the local matching funds are available.

The federal share (portion) of the eligible capital costs may not exceed 80 percent of the net operating costs of the activity. The local share (local match) of eligible operating costs shall be no less than 20 percent of the net operating costs. The local match may be provided from an undistributed cash surplus, a replacement or depreciation cash fund or reserve, a service agreement with a state or local service agency or private social service organization, or new capital. Some examples of these sources of local match include state or local appropriations; dedicated tax revenues; private donations; revenue from service contracts; transportation development credits; and net income generated from advertising and concessions. Non-cash local match such as donations, volunteered services, or in-kind contributions is eligible to be counted toward the local match as long as the value of each is adequately documented and supported, represents a cost which would otherwise be eligible under the program, and is included in the net project costs in the project budget.

No FTA program funds can be used as a source of local match for other FTA programs, even when used to contract for service. **All sources of local match must be identified and described in the grant application, and display that if the capital purchase is higher than the expected amount that the applicant has the funds to pay for the increased cost of the eligible capital item(s).**

The applicant agency must assure and document that local matching funds (cash) are available to cover at least 20% of the cost of the equipment they are requesting. The applicant may provide the local match from other federal programs that are eligible to be expended for transportation, with the exception of USDOT/FTA programs.

H. Application Instructions

Applicants must submit one electronic copy (pdf) of the grant application. Submissions must be able to be emailed as one document. Citilink must receive project applications no later than 4:00 PM (EST) 2/16/2026 emailed to pr@fwcitilink.com.

Each applicant must submit a PDF application containing the application materials described below. Please have all documentation, certifications, assurances, and required attachments at the end of the application.

For operational applications the application any documentation **MUST** be included in the Attachments section or at the end of the application between the application.

For capital funding applications any documentation **MUST** be included in the Attachments section or at the end of the application.

If the applicant is unable to attach the requested documents in the Attachments Section of the relevant application please combine the documents with the completed application or email the documents with your submission of the relevant application(s).

Answers should be clear, complete and concise. Answers should be provided based upon the assumption that the audience is neither technically trained nor familiar with the project being proposed. All sections of the application must be completed to be eligible. Applicants that need assistance in completing the application may request help by calling or emailing Patrick Rorick at 260-432-4546 or pr@fwcitilink.com.

All applications must be completed utilizing the appropriate application template located on Citilink's website (www.fwcitilink.com)

Operational Funding Application Checklist

Organize grant material in this order, please include a completed application checklist with your submission with the application.

All required general and program specific (operational) attachments listed in the call for projects and application must be submitted to be deemed eligible.

Operational Funding Application Checklist	Complete (yes or no)
Part 1 - Transmittal	
Part 2 – Narrative (all of the following must be completed to be eligible)	
- Experience and Existing Services	
- Project Description, Goals, and Objectives	
- Implementation and Operations Plan	
- Project Budget – include PART III – 2 YEAR PROJECT BUDGET following this Section	
- Agency/Organizational Budget and Most Recent Audited Financials	
- Documentation of Matching Funds (local match letter)	
- Agency/Organization Procurement Policy	
- Agency/Organization Title VI Plan	
- Organizational Chart	
- Program Effectiveness and Performance Measures	
- Coordination and Program Outreach Plan	
Part 3 – Project Budget	
Requirements and Certifications (found in the call for projects)	
All Required Attachments at the end of the application	

One electronic (PDF) application (compiled in this order) must be submitted by 4:00 PM (EST), February 16th, 2026.

Submissions MUST be emailed as one document if technical issues arise when submitting please immediately reach out to Citilink for alternative submission methods.

Please make sure all attachments are clearly identified (labeled) and referenced in your narrative.

Operational Funding Application

OPERATIONAL FUNDING APPLICATION INSTRUCTIONS

All applications must be completed using the application template provided on Citilink's website with all additional documents, requirements, and certifications at the end of the application. The template can be found on Citilink's website at www.fwcitilink.com. For Operational Funding Applications all applicable documents, assurances, and certifications listed in the Call for Projects **MUST** be submitted before the submission deadline. All documents, assurances, and certifications listed in the Call for Projects are applicable to Operational Funding Applications with the exception of items specifically listed within the Capital Funding Application section of the Call for Projects. Please refer to the Evaluation Criteria section (Appendix B in the Call for Projects and posted on www.fwcitilink.com) to ensure that your responses in the application (and documentation) meet the listed scoring criteria for the respective questions. Applications will be scored solely based on the information submitted to Citilink.

Application Checklist

Applications must include the completed Application Checklist Form and organize the application materials in the order listed.

Operational Funding Application Part 1 - Transmittal

Application Qualifiers: If your answer is NO to either question below, please do not proceed with the application; applications with a negative answer to either question will not be evaluated.

Question	Response
Does the project address at least one (1) strategy identified in the local coordinated plan?	
Does the applicant have the required local matching funds to cover the matching requirements (50% of operating expenses)?	

A. Applicant Information:

Applicant Information	Response
Applicant Name:	
Address:	
City/zip code:	
Contact Person:	
Email:	
Phone:	

Alternate Contact (Optional):	
Phone:	
Employer Identification Number (EIN):	
Organizational DUNS/UEI:	

B. Project Cost

Description	Response
Total Project Cost	
Amount of Section 5310 Funding Requested	
Total Matching Funds Available (non-DOT federal, local or private)	

C. To the best of my knowledge and belief, all information in this application is true and accurate. The document has been duly authorized by the governing body of the applicant, and the applicant will comply with any certifications and assurances if the assistance is awarded.

Signature of Authorized Representative: _____

Printed Name of Authorized Representative: _____

Date:

Operational Funding Application Part 2 – Narrative

Project Summary

Answer:

EXPERIENCE & EXISTING SERVICES

1. Provide a brief description of the applicant and its background with implementing this type of project (enhanced mobility for seniors and individuals with disabilities):
2. Provide a brief description of the applicant's existing services:
3. List current sources and amounts of local funding:
4. Provide a description of the existing service area (provide demographic, economic, and geographic information):
5. Briefly describe how the proposed project helps to address any identified senior/disabled transportation service gaps/needs in your service area. Specifically, those identified in the Coordinated Plan as well as those specific to your agency's clients. Please provide ridership characteristics of your service including race, percent of riders that are seniors, and the percent of riders that are individuals with disabilities:

PROJECT DESCRIPTION, GOALS & OBJECTIVES

1. Provide an overview of the project, including the project's goals and objectives:
2. Identify and describe the Section 5310 Operational Funding strategy(ies) identified in the Coordinated Plan (<https://www.in.gov/nircc/>) that the proposed project seeks to address and provide any other relevant documentation of the need:
3. Describe how the project will mitigate the transportation need(s):
4. Estimate the number of people from the targeted group(s) that will be served and/or service units served that will be provided:
5. Describe the service area for this project and explain why it was chosen. Applicants must provide pertinent demographic data and/or maps (attach and reference) to support this answer:

IMPLEMENTATION AND OPERATIONS PLAN

1. Describe key personnel assigned to the project, and your agency's ability to manage the project:
2. Provide a well-defined operational plan for delivering service. Include route or service area map, if applicable:
3. Explain how the project relates to other services or programs provided by your agency or firm and demonstrate how it can be achieved within your technical capacity:
4. Provide a timeline for project implementation from the time of grant award until the project is complete at the end of 12-month period, including milestones:
5. Applicants must apply annually for project funding. Describe how you intend to continue the project should Section 5310 funding no longer be available for this project in future years:

PROJECT BUDGET

1. Provide a complete project budget indicating project revenues and expenditures in the format provided in the Project Budget Section of the application. Estimate the proposed cost per trip (or other unit of service) and describe efforts to ensure cost-effectiveness.

Cost Per Trip:

Efforts to Ensure Cost-Effectiveness:

2. Provide evidence of financial capability as an attachment. Applicants **MUST** provide a copy of the agency's overall budget and a copy of your agency's most recent audit as an attachment. In addition, applicants **MUST** provide documentation of matching funds and resources to be leveraged including a local match letter. This will be in the form of a letter from the financial officer stating the source, amount, and availability of matching funds. If a loan is being utilized as local match, applicant must provide a loan approval letter from the financial institution. The application will be considered incomplete and not evaluated if these are not included.
3. Describe how the project relates to any federal or state programs that you operate:
4. Explain how resources obtained through other federal programs can be leveraged for the project:

PROGRAM EFFECTIVENESS & PERFORMANCE MEASURES

1. The project application should demonstrate that the proposed project is the most appropriate match of service delivery to the need that would be addressed. Identify

performance measures to track the effectiveness of the service in meeting the identified goals:

2. Describe a plan for monitoring and evaluation of the service, and steps to be taken if original goals are not achieved:

COORDINATION & PROGRAM OUTREACH PLAN

1. Describe how the project will be coordinated with public and/or private transportation and social service agencies serving low-income populations and individuals with disabilities:
2. Describe how you will market the project and promote public awareness of the program. Letters of support from key stakeholders and supporting documentation may be attached in the Appendix (Letters and supporting documentation relevant to this question is limited to 5 pages):

Operational Funding Application Part 3 - Project Budget

OPERATING ASSISTANCE BUDGET

OPERATING EXPENSES	YEAR 1	TOTAL
Driver's Salaries & Fringe Benefits		
Other Staff Salaries & Fringe Benefits (Supervisor, Administrative, Dispatch, Etc.)		
Contractual Services		
Vehicle Maintenance (Lubricants, Tires, Repairs, Etc.)		
Vehicle Fuel		
Vehicle Insurance		
Other Materials & Supplies		
Utilities		
Taxes		
Purchased Transportation		
Leases & Rentals		
Miscellaneous Expense		
TOTAL OPERATING EXPENSE		
OPERATING REVENUES		
Passenger Fare / Donation Revenue		
Auxiliary and Non-Transportation Revenue (specify sources and amounts)		
Other (specify sources and amounts)		
TOTAL OPERATING REVENUE		
NET OPERATING COSTS		
LOCAL SHARE (at Least 50% of Project Cost) List each source and amount. In-kind contributions allowed pursuant to 49 CFR 18.24 or 49 CFR 19.23		
FEDERAL SHARE (no more than 50% of Project Cost)		

Prepared by:		Date:	
Signature	<hr/>		
Name and Title			

Operational Funding Application Part 4 - Attachments

Capital Funding Application Checklist

Organize grant material in this order, please include a completed application checklist with your submission with the application.

All required general and program specific (operational) attachments listed in the call for projects must be submitted to be deemed eligible.

Capital Funding Application Checklist	Complete (yes or no)
Capital Funding Application Part 1 - Applicant Information	
Capital Funding Application Part 2 - Project Need	
Capital Funding Application Part 3 - Vehicle Inventory	
Capital Funding Application Part 4 - Fiscal Managerial Capability	
Capital Funding Application Part 5 - Coordination	
Attachments and Documentation	
- Requirements and Certifications (found in the call for projects in the Requirements and Certifications section)	
- Required Attachments (listed in the Call for Projects located in the introduction section including subsections F and G, and Capital Funding Application)	

One electronic (PDF) application (compiled in this order) must be submitted by 4:00 PM (EST), February 16th, 2026.

Submissions MUST be emailed as one document if technical issues arise when submitting please immediately reach out to Citilink for alternative submission methods.

Please make sure all attachments are clearly identified (labeled) and referenced in your narrative.

Capital Funding Application

Capital Funding Application Instructions

All applications must be completed using the application template with all additional documents, requirements, and certifications at the end of the application. The template can be found on Citilink's website at www.fwcitilink.com. For Capital Funding Applications all applicable documents, assurances, and certifications listed in the Call for Projects **MUST** be submitted before the submission deadline. All documents, assurances, and certifications listed in the Call for Projects are applicable to Capital Funding Applications with the exception of items specifically listed within the Operational Funding Application section of the Call for Projects. Please refer to the Evaluation Criteria section (Appendix B in the call for projects and posted on www.fwcitilink.com) to ensure that your responses in the application (and documentation) meet the listed scoring criteria for the respective questions. The scoring of applications will be solely based off the information submitted to Citilink.

Submissions MUST be emailed as one document if technical issues arise when submitting please immediately reach out to Citilink for alternative submission methods

Capital Funding Application Part 1 – Applicant Information

Application Qualifiers: If your answer is NO to either question below, please do not proceed with the application; applications with a negative answer to either question will not be evaluated.

Question	Response
Does the project address at least one (1) strategy identified in the local coordinated plan?	
Does the applicant have the required local matching funds to cover the matching requirements (20% of capital expenses)?	

Applicant Information

1. Applicant Name and DUNS/UEI:		
2. Applicant Address:		
3. Contact Person:		
4. Telephone Number:		
5. Email Address:		
6. Geographical area served by requested equipment:		
7. Number and Type of Vehicles Requested:		
8. Total Project Cost (capital only): \$		
9. The type of service your organization provides (check A,B, and or C below accordingly)		
A. Demand Response	Yes: _____	No: _____
B. Fixed Route	Yes: _____	No: _____
C. Other (specify)	Yes: _____	No: _____

10. Requested Vehicles will (select one of the below)

A. Replace existing Service Yes: _____ No: _____

B. Expand Existing Service Yes: _____ No: _____

C. Start New Service Yes: _____ No: _____

11. Total number of one-way passenger trips provided by your agency in 2025:

12. Total vehicle miles traveled by your active vehicle fleet in 2025:

(this is the total distance traveled by active passenger vehicles during the provision of passenger transportation service)

13. Total Operating Expenses in 2025:

(exclude capital vehicle purchases from this cost)

Citilink requires the submission of the Applicant Information Form (the above Forms in the Applicant Information Section) for each organization submitting a Section 5310 application for capital funding. Guidance for completing this form is provided below:

Item Number	Guidance:
1-4	General information - name of applicant organization, address, contact person, telephone number, e-mail address and DUNS number.
5	Applicant type check one.
6	Service area for requested equipment - List name(s) of cities, towns and counties that will be served by the requested equipment.
7	Number and type of vehicles requested summary of Estimated Capital Budget. Example: 2 vans – one each, mini-van and Type C Van
8	Total project cost total cost from Estimated Capital Budget.
9	Type of service Demand Response includes dial a ride, advance registration and door to door specialized service. Fixed Route refers to service following a set route or schedule.
10	Vehicle use - Applicants may request vehicles to replace existing equipment, for the expansion of services, or to start new service.
11	One way passenger trips - total number of one-way passenger trips provided during the past calendar year. Citilink defines a one-way trip as one origin to destination trip for each passenger riding in a vehicle. For example, taking a van with six passengers to the grocery and back to their homes counts as 12 one-way passenger trips.
12	Total Vehicle Miles - The total distance traveled by active passenger vehicles (during the provision of passenger transportation service) during the past calendar year.

13	Total Operating Expenses - The total of all transportation operating costs incurred during the past calendar year, excluding expenses associated with capital grants. Expense figures may be unaudited.
14	Ridership characteristics estimate the percentage, within each group, that your agency serves.

Capital Funding Application Part 2 – Project Need

Instructions: Project Need: Discuss the extent and urgency of need for the requested capital equipment. Each applicant must describe its need to replace or expand transportation capacity.

Answer the following questions thoroughly, but briefly. All answers must be completed utilizing the Project Need Answer Template below. Attach and reference vehicle repair history, vehicle pictures or other evidence of vehicle need to the application.

- A. **Project Need: Answer the following questions thoroughly, but briefly.** Attach vehicle repair history, vehicle pictures or other evidence of vehicle need.
1. Provide a brief overview of your agency programs and service area. If contracting for service, also provide an explanation of the service provider arrangement.
 2. Vehicle Usage Information: for **b-i provide data for each requested vehicle separately, vehicle data, not agency data by filling in the blanks.**
 - a. Describe the service your agency will provide with the requested equipment (type of service; 5310 population to be served - seniors, individuals with disabilities, or both, service hours, days of service, trip purpose, demographics of ridership characteristics – including race, ethnicity, percent of seniors, and percent of individuals with a disability, eligibility, and service area).

Complete b. – i. for each requested vehicle, copy if necessary
 - b. Is the requested vehicle for replacement or expansion?
 - c. Number of unduplicated transportation clients per year
 - d. Number of one-way passenger trips provided per year
 - e. Average number of hours the vehicle will be in service on a weekly basis (include the hours that the vehicle will be utilized by other agencies).
 - f. Average number of weekly one-way passenger trips
 - i. Average number of passengers per vehicle trip
 - ii. Number of passenger trips that are wheelchair passengers
 - g. Vehicle seating Capacity (with and without wheelchair spaces occupied). If capacity will vary for the trips provided by the vehicle, please list all capacities that will be utilized; i.e. based on configurations, the vehicle could have a capacity of 3, 5, or 8 for certain types of trips.

- i. A: Vehicle seating Capacity with wheelchair spaces occupied
 - ii. Vehicle seating Capacity without wheelchair spaces occupied
 - iii. Varying Capacity:
- h. If capacity will vary for trips, please estimate the percentage of vehicle use at that capacity, i.e. a capacity of 3 for 25% of trips, 5 for 50% of trips, and 8 for 25% of trips.
 - i. Varying Capacity (**If this applies**):

Capacity of	for	% of trips
Capacity of	for	% of trips
Capacity of	for	% of trips
Capacity of	for	% of trips
- 3. IF REQUESTING REPLACEMENT VEHICLES - - Provide the following information:
 - a. Explain and demonstrate urgency of need for equipment requested: age/condition/mileage (**12/31/2025**) of vehicle(s) to be replaced, condition of active vehicle fleet, availability of backup vehicles, accessibility needs (refer to Vehicle Inventory)
 - b. Attach and reference repair history of major expenses (engine, transmission, cooling, etc), photos and other information as appropriate.
- 4. IF REQUESTING EXPANSION VEHICLES - Provide the following information:
 - a. Explain and provide documentation on how need was identified. If applicable, provide the number of trip denials during the past year, or people on waiting list. How many of these trip denials are individuals with disabilities?
 - b. How will your agency pay for the cost (driver wages, fuel, maintenance) of operating the additional vehicle(s)?
- 5. Briefly describe how the proposed equipment helps to address any identified senior/disabled transportation service gaps/needs in your service area. Specifically, those identified in the Coordinated Plan as well as those specific to your agency's clients. Please provide ridership characteristics of your service including race, percent of riders that are seniors, and the percent of riders that are individuals with disabilities.
- 6. **Please provide the Vehicle Serial Number for each vehicle your agency wants to replace.** These numbers must match the vehicle serial numbers on your Vehicle Inventory.
- 7. If requesting a Small/Medium/Large Transit vehicle without a lift, provide a brief explanation why your agency is requesting a non-lift vehicle.
- 8. Provide a brief description of the applicant and its background with implementing this type of project (enhanced mobility for seniors and individuals with disabilities).

9. List current sources and amounts of local funding.

Capital Funding Application Part 3 - Vehicle Inventory

VEHICLE INVENTORY – AS OF 12/31/2025							
Mark vehicle(s) this request would replace with an asterisk (*)							
Year/ Model	Vehicle Type	Vehicle Serial Number	Lift/ Ramp Equipped	Seating Capacity	Capital Funding Sources Federal and Local	Odometer Mileage as of 12/31/2025	Condition of Vehicle (see below)
*04/Example	C	3BOYB1117H517K923	YES	10	Section 5310	149,799	Fair
Total Seating Capacity of Active Vehicles:							
	Vehicle Type Abbreviations			Please use the following scale to indicated Condition of Vehicle:			
	CAR	Sedan/Station Wagon					
	MV	Mini-van		GOOD - Requires standard maintenance			
	LFMV	Low Floor Mini-van		FAIR - Requires frequent minor problems			
	A	Standard Van		POOR - Requires frequent major problems			
	B	High Top van, no lift		BAD - use presents continued major mechanical problems			
	C	High Top van <u>with</u> lift					
	BOVC	Body on Chassis vehicle					

Vehicle Inventory Instructions:

1. Include all active passenger transportation vehicles in your fleet. Do not include vehicles that are inappropriate for passenger transportation or are not in service. If more room is needed on the chart please attach a chart with the **SAME** formatting in the Attachment Section.

Check Yes if you added a vehicle inventory as an attachment and check No if you did not
_____ Yes Or _____ No

2. Mark the vehicle(s) that this request would replace with an asterisk (*). Ensure the vehicle identification number is included in your project need section.
3. Identify the mileage from the odometer as of 12/31/2025
4. Report the current condition of the vehicle using the provided scale. Your application can discuss the potential condition at the time of replacement under the project need section.
5. The total seating capacity should reflect active vehicles. Do not include vehicles that are inappropriate for passenger transportation or are not in service.

Capital Funding Application Part 4 - Fiscal Managerial Capability

This section gives your agency the opportunity to explain your ability to comply with contract provisions, provide local capital match (20%), vehicle operation and maintenance funding, driver training, administrative oversight and organizational stability.

Answer the following questions thoroughly, but briefly. Attach and reference other documentation as necessary.

A. Fiscal/Managerial Documentation:

1. Provide the following calendar year 2025 transportation service data:

- Total one-way passenger trips:
- Total vehicle miles:
- Total operating expenses:

Passenger Trip - One person making a one-way trip from origin to destination. One round trip equals two passenger trips.

Total Vehicle Miles - The total distance traveled by active passenger vehicles during the past calendar year, during the provision of passenger transportation service. Excludes miles for driver training and vehicle maintenance.

Total Operating Expenses - The total of all transportation operating costs incurred during the past calendar year, excluding expenses associated with capital grants. Expense figures may be unaudited.

2. Using the above information, calculate and include operating cost per mile, as well as operating cost per one way passenger trip. You may also include other data that reflects the quality and effectiveness of your transportation services.

Cost Per Mile:

Cost Per One-Way Passenger Trip:

To calculate cost per mile: Divide the total cost of providing transportation service last year by the total vehicle miles traveled by the passenger vehicles in your fleet.

To calculate cost per one-way passenger trip: Divide the total cost of providing transportation service last year by the number of one-way passenger trips provided last year. Be sure to use passenger trip data (each time a person enters a vehicle to go somewhere) not the unduplicated client roster for this calculation.

3. List the number and type of personnel involved in operating and managing your transportation service. This includes all full/part time/volunteer managers, drivers,

dispatchers and mechanics that are employees of your organization or contracted to provide your transportation service:

4. Describe provisions made to ensure proper maintenance of vehicles. Identify the person(s) or business responsible for providing vehicle maintenance. Describe your agency's preventative maintenance program or measures (attach preventative maintenance plan if available):
5. Describe provisions made to ensure the safe operation of vehicles: Driver selection and training policies, recent driver training, safety standards, transportation service policies, insurance coverage, etc:
6. How does your agency advertise the availability of vehicles for transportation? Provide documentation of written policies regarding transporting of service animals, personal care attendants and portable oxygen:
7. Identify the source, amount and status of the 20% match for the requested equipment. Are other requests for this equipment pending?:
8. Identify current/anticipated sources of operating funding available to support the operation of the requested equipment throughout its useful life:

Estimated Capital Budget

Vehicle type, make, model, and year (include if it has a ramp, lift, etc.)	Quantity of Vehicles	Single Unit Cost	Total Cost
Total Vehicle Cost			

Vehicle Options					
Vehicle Type, Make, Model, and Year	Quantity of Vehicles	Option	Quantity of Options	Total Cost of Single Option	Total Cost of Options
Total Estimated Option Cost					

Local Match (applicant Funds) 20% of Total	Funding Source and Percent of Match	Funding Amount (total should be 20% of total project cost)
- Funding Source:		
- Funding Source:		
- Funding Source:		
- Funding Source:		
Total Local Match		
Federal Funding 80% of Total	Section 5310 Funds (100% of federal portion)	
Total Capital Project Cost	Total Local Match Plus Federal Funding	

Prepared by: Signature Name and Title		Date:	

Capital Funding Application - Estimated Annual Operating Budget

This must be completed as part of the application

This is not a request for operating funds budget

Expense	2027	2028	2029	2030	2031
Driver Salaries and Fringe Benefits					
Other Staff Salaries and Fringe Benefits (supervisor, administrative, dispatch, etc.)					
Vehicle Operation (fuel, oil, tires, maintenance, repair, etc.)					
Vehicle Insurance					
Other					
Total Expense					
Revenue					
Fare Revenue					
Donation Revenue					
Other: List and identify other specific sources and the respective amount of funds that will be available to cover operating costs from those sources. The total amount listed below plus fare revenue should equal the total operating costs estimated above.					
Total Revenue					
Difference (Total Revenue – Total Expenses)					

This estimate of operating costs is not a request for funds. Operating expenses are not an eligible item under the capital portion of the Section 5310 program. Your organization will be operating this equipment for longer than one year. Therefore, your organization will need to plan for long-term (5+ years) operation as well.

Recent Agency Financial Audit

Applicants **MUST** provide a copy of the agency's overall budget and a copy of your agency's most recent audit as an attachment to this application. In addition, applicants **MUST** provide documentation of matching funds and resources to be leveraged including a local match letter. If a loan is being utilized as local match, the applicant must provide a loan approval letter from the financial institution. The application will be considered incomplete and not evaluated if these are not included

Capital Funding Application Part 5 - Coordination

This section is your opportunity to demonstrate a strong working relationship with local public and private transportation providers in your service area. Applicants must work together with local transit and paratransit operators in developing a comprehensive transportation network in the project area. Applicants should also seek to coordinate services with other programs for seniors and individuals with disabilities. In addition, Federal legislation which authorizes funding for transportation requires that all projects selected for funding from 5310 program must be derived from the Coordinated Public Transit-Human Services Transportation Plan for Allen County (<https://www.in.gov/nircc/>). All vehicle requests must address at least one (1) of the Section 5310 Capital Funding strategies identified in the Coordinated Plan.

Answer the following questions thoroughly, but briefly. All answers must be completed utilizing the Coordination Answer Template provided in Microsoft Word. Attach and reference other documentation as necessary.

Coordination Documentation:

1. Identify the Section 5310 Capital Funding strategy (is) identified in the Coordinated Plan that the requested vehicle(s) will address and describe how the vehicle request will address the need:
2. Do you participate in NIRCC's Transportation Advisory Committee (TAC)? NIRCC will verify your TAC attendance:
3. Discuss the level of coordination with other agencies anticipated with each requested vehicle:
4. Discuss the level of private sector involvement anticipated with each requested vehicle:
5. How many trips has your agency provided for other agencies in the past 12 months? Please list the agencies and the number of trips provided for each (if available):
6. Applicants should submit evidence of coordination with other nonprofit, for profit and public transportation providers. This includes service agreements, resource sharing, referral arrangements, coordinated vehicle dispatch, memorandum of understanding, coordination

action plans, joint training, etc. Please list and reference while attaching the documents to the application:

Capital Funding Application Part 6 - Attachments

REQUIREMENTS AND CERTIFICATIONS

A. Certificate of Incorporation

Private nonprofit corporations must submit a Certificate of Incorporation to prove private nonprofit status. Send only the page containing the Indiana Secretary of State Seal and approval date. Do not send amendment pages unless the amendment affects the official name or status of your organization.

A letter from the federal Internal Revenue Service confirming your organization's 501(c) (3) status is not evidence of your agency's status as a not-for-profit corporation incorporated in the State of Indiana.

B. W-9 Federal Tax ID Form

All applicants must submit a signed W-9 Federal Tax ID with their grant application. A fillable PDF can be downloaded at <https://www.irs.gov/pub/irs-pdf/fw9.pdf>.

C. Reports and Inspections

The **(Organization's/entity's name)**, herein referred to as the Grantee, agrees to submit to the Fort Wayne Public Transportation Corporation, herein referred to as Citilink, such quarterly, annual or special financial and operating reports as Citilink may reasonably request. The Grantee also agrees to make available for inspection, by any duly authorized agent of Citilink, any records, documents, leases, operating and use agreements and other instruments which affect the Grantee and are pertinent to this project.

D. Indemnification

The Grantee agrees to indemnify, defend, and hold harmless Citilink, the Northeastern Indiana Regional Coordinating Council (NIRCC), or their respective agents, officers, and employees from all claims and suits for loss of or damage to property; including, the loss of use thereof and injuries to or death of persons, the property of officers, agents and employees of the Grantee or its subcontractors; and from all judgments recovered therefore, and from expenses in defending said claims, or suites, including court costs, attorney's fees and other expenses, caused by an act or omission of the Grantee and/or subcontractors, their respective agents, officers, servants and employees, and not caused by the sole fault or negligence of Citilink, NIRCC, or its respective agents, officers and employees.

E. General Requirements

The Grantee shall immediately notify Citilink of any change in conditions or of any event, which may significantly affect the Grantee's ability to perform the project in accordance with the provisions of this application and the subsequent authorization.

Any proposed change in the project, as described in this application, must be made by the mutual consent of the Grantee and Citilink; and must have prior written approval of Citilink.

Any provision of this document (not governed by federal law and regulation, whether or not incorporated within this document) shall be construed and interpreted in accordance with the laws of the State of Indiana.

F. Fiscal and Administrative Provisions

The Grantee shall comply with fiscal and administrative provisions detailed in Indiana Code 36-1-8, 36-1-9, and 36-1-10 or applicable federal requirements, whichever is most restrictive.

G. Certifications and Assurances for Federal Transit Agency Programs

To be eligible applicants **MUST** select yes for the categories that apply to it. To ensure that you meet the Federal Transit Agency certifications and assurances please follow the link below the table in this section. If yes is selected that indicates that the applicant is agreeing to comply with the requirements for the category.

Name of Applicant: _____

The Applicant agrees to comply with applicable requirements of Categories 01 – 20 which apply to this project. **Yes or NO**

(The Applicant may make this selection in lieu of individual selections below)

OR

The Applicant certifies that they will comply with the applicable requirements of the following categories it has selected (for specific requirements please follow the link below):

Category	Required for:	Applicant Certifies (yes, no, or N/A)
1. Certifications and Assurances Required of Every Applicant	All Projects/Applicants	
2. Public Transportation Agency Safety Plans	N/A	
3. Tax Liability and Felony Convictions	An applicant that is a private corporation, partnership, trust, joint-stock company, sole proprietorship, or other business association	
4. Private Sector Protections	An applicant applies for funds that it will use to acquire or operate public transportation facilities or equipment	
5. Transit Asset Management Plan	All Projects/Applicants	
6. Rolling Stock Buy America Reviews and Bus Testing (required for capital projects for the call for projects)	Capital Projects/Applicants Pursuing Capital Funding	
7. Urbanized Area Formula Grants Program (required for all applicants responding to the call for projects)	All Projects/Applicants	
8. Formula for Rural Areas	N/A for this call for projects	
9. Fixed Guideway Capital Investment Grants and the Expedited Project Delivery for Capital Investment Grants Pilot Program	N/A for this call for projects	

10.	Grants for Buses and Bus Facilities and Low or No Emission Vehicle Deployment Grant Programs	N/A for this call for projects	
11.	Enhanced Mobility of Seniors and Individuals with Disabilities Programs (required for all applicants responding to the call for projects)	All Projects/Applicants	
12.	State of Good Repair Grants	N/A for this call for projects	
13.	Infrastructure Finance Programs	N/A for this call for projects	
14.	Alcohol and Controlled Substances Testing	All Projects/Applicants	
15.	Rail Safety Training and Oversight	N/A for this call for projects unless applicant operates rail.	
16.	Demand Responsive Service	If demand response service is offered and will apply for award to purchase non-rail vehicle(s) that are not accessible.	
17.	Interest and Financing Costs	If the applicant will pay for interest or other financing costs using assistance from federal funds from this call for projects	
18.	Cybersecurity Certification for Rail Rolling Stock and Operations	Rail Fixed Guideway Public Transportation System Operators	
19.	Tribal Transit Programs	N/A for this call for projects	
20.	Emergency Relief Program	N/A for this call for projects	

FTA intends that the certifications and assurances the Applicant has selected above should apply, as required, to each project for which the Applicant seeks now, or may later, seek FTA assistance.

Certifications and assurances can be found at:

<https://www.transit.dot.gov/funding/grants/grantee-resources/certifications-and-assurances/fy2025-annual-list-certifications>

Signature of Applicant: _____

Date: _____

H. Local Assurances

The grantee hereby assures and certifies with respect to this application for Section 5310 Funding that:

1. The Applicant has the requisite fiscal, managerial and legal capability to carry out the Section 5310 Program and to receive and disburse Federal funds.
2. This project was developed out of the efforts of a locally developed coordinated public transit-human services transportation plan.
3. Private for-profit transit and para-transit providers have been afforded a fair and timely opportunity by the applicant to participate to the maximum extent feasible in the planning and provision of the proposed transit services.
4. The Applicant has the maximum extent feasible coordinated with other transportation providers and users, including social service agencies capable of purchasing service.
5. Some combination of local and/or private funding sources has or will be committed to provide the required local share.

I. Bankruptcy/Litigation Certification

Federal regulations require the questions below be asked of each applicant. Please read each item carefully before signing. Provide a brief explanation if your agency answers “yes” to any question. Answering “yes” will not automatically disqualify your application. Citilink will review each situation to gauge its relevance to your application.

Yes	No	Question
<input type="checkbox"/>	<input type="checkbox"/>	Has your agency (or the contracted provider) ever declared bankruptcy?
<input type="checkbox"/>	<input type="checkbox"/>	Is your agency (or the contracted provider) in litigation or has any claims of violation of law or regulations filed against it (during the past three years)?
<input type="checkbox"/>	<input type="checkbox"/>	Is your agency (or the contracted provider) had been named in any lawsuits or complaints, with respect to service or other transportation benefits, which allege discrimination on the basis of disability (during the past three years)?
<input type="checkbox"/>	<input type="checkbox"/>	Is your agency (or the contracted provider) been named in any lawsuits or complaints, which allege discrimination on the basis of race, color, or national origin with respect to service or other transportation benefits (during the past three years)?
<input type="checkbox"/>	<input type="checkbox"/>	Has your agency (or the contracted provider) participated in a civil rights compliance review within the past three years?

If “yes” to any questions above, provide an explanation (use additional paper if necessary):

For Public Bodies, the following signatures are required for the Bankruptcy/Litigation Certification:

Entity	Signatures	Attest
County	Commissioners (majority)	Auditor
City	Mayor and Board/Council (majority)	Clerk Treasurer
Town	President and Board/Council(majority)	Clerk Treasurer
Public Transportation Corporation	Board President	Board Secretary

J. Verification

I am an officer of the applicant corporation herein and am authorized to make this verification on its behalf. The statements in the foregoing document are true to my own knowledge. By signing below, I declare that the Applicant has duly authorized me to make these certifications and assurances on the Applicant's behalf and bind the Applicant's compliance (attach authorizing resolution or other document witnessing this authorization). Thus, the Applicant agrees to comply with all Federal statutes, regulations, executive orders, and administrative guidance required for each application it makes to the Federal Transit Administration (FTA) in **Federal Fiscal Years 2026 and 2027** (this is due to the call for projects being issued in FFY 2026), as well as all other State and local assurances and certifications.

The Applicant affirms the truthfulness and accuracy of the certifications and assurances it has made in the statements submitted herein with this document and any other submission made to INDOT or FTA regarding this project, and acknowledge that the provisions of the Program Fraud Civil Remedies Act of 1986, 31 U.S.C. 3801 *et seq.*, and implemented by U.S. DOT regulations, "Program Fraud Civil Remedies, " 49 CFR Part 31 apply to any certification, assurance, or submission made to FTA. The criminal fraud provisions of 18 U.S.C. 1001 apply to any certification, assurance; or submission made in connection with the Federal public transportation program authorized in 49 U.S.C. chapter 53 or any other statute.

In signing this documentation, I declare under penalties of perjury that the foregoing certifications and assurances, and any other statements made by me on behalf of the Applicant are true and correct.

Name of Chief Executive Officer: <i>PRINTED</i>	
Title:	
Date of grant submittal:	

Signature: _____

Chief Executive Officer

K. Standard Assurances

- B. All assurances associated with the Section 5310 application have been combined into one form. Please read each item carefully before signing. In addition, we recommend that your agency's legal counsel review these assurances.
- C. Federal regulations require Citilink and each applicant follow the requirements listed in the standard assurances below. Individuals who desire more information about these requirements may contact Citilink. (next page)

Standard Federal Section 5310 Certifications and Assurances FFY 2025

1. The applicant has or will have by the time of delivery, sufficient funds to operate and maintain the vehicles and equipment financed with Federal assistance awarded for its project;
2. The applicant has coordinated or will coordinate to the maximum extent feasible with other transportation providers and users, including social service agencies authorized to purchase transit service;
3. The applicant has complied or will comply with all applicable civil rights requirements;
4. The applicant has complied with or will comply with applicable requirements of U.S. DOT regulations regarding participation of disadvantaged business enterprises in U.S. DOT programs;
5. The applicant has complied with or will comply with Federal requirements regarding transportation of seniors and individuals with disabilities;
6. The applicant has complied with or will comply with applicable provisions of 49 CFR part 605 pertaining to school transportation operations;
7. Viewing its demand responsive service to the general public in its entirety, the applicant has complied with or will comply with the requirement to provide demand responsive service to individuals with disabilities, including individuals who use wheelchairs, meeting the standards of equivalent service set forth in 49 CFR 37.77(c), before purchasing non-accessible vehicles for use in demand responsive service for the general public;
8. The applicant has complied or will comply with the requirement that its project provides for the participation of private mass transportation companies to the maximum extent feasible;
9. The applicant has complied with or will comply with all applicable lobbying requirements for each application (per 49 CFR 20.110) exceeding \$100,000;
10. The applicant has complied or will comply with all applicable procurement and nonprocurement suspension and debarment requirements;
11. The applicant has complied or will comply with applicable FTA Intelligent Transportation Systems architecture requirements to the extent required by FTA.
12. The applicant will comply with all applicable federal requirements per the FTA Federal Fiscal Year 2025 Annual List of Certifications and Assurances for Federal Transit Administration Grants and Cooperative Agreements, as referenced at:
<https://www.transit.dot.gov/funding/grants/grantee-resources/certifications-and-assurances/fy2025-annual-list-certifications>

Signatures:

Signature and Title of Authorized Representative of Applicant

Date

For Public Bodies, the following signatures are required for the Standard Assurances:

Entity	Signatures	Attest
County	Commissioners (majority)	Auditor
City	Mayor and Board/Council (majority)	Clerk Treasurer
Town	President and Board/Council(majority)	Clerk Treasurer
Public Transportation Corporation	Board President	Board Secretary

L. Additional Federal, State, and Program Requirements

1. As of October 1, 2012, the Federal Transit Administration (FTA) Title VI Circular 4702.1B Requirements and Guidelines for Federal Transit Administration Recipients went into effect. This revised guidance affects all Section 5310 applicants and grantees. Title VI prohibits discrimination on the basis of race, color, age, sex, sexual orientation, gender identity, disability, national origin, religion, income status or limited English proficiency. As such, all Section 5310 Grantees must have a completed Title VI Program Plan, and the capacity to update, maintain, and develop (if not established) a Title VI Program Plan.
2. The applicant must also meet all procurement requirements in accordance with FTA Circular 4220.1G. This includes having a procurement policy (and the capacity to develop such a policy) that meets all FTA regulations, and the capacity to maintain, update, and develop (if not established) a procurement policy that complies with all FTA guidelines.
3. The applicant must provide documentation of recently audited financial documents displaying the financial capacity of the applicant, and financial control documentation.
4. The applicant must provide an approved local match letter. Please see the Requirements and Certifications section in the call for projects for an example of local match documentation (listed as Local Match Documentation in the Call for Projects).
5. The applicant must provide an organizational chart and documentation of staff turnover **(minimum of the last 5 calendar years)** in positions that would be involved in the grant and/or project.
6. In addition, as required by IC 822-5-1.7, all Section 5310 Grantees entering into contracts with Citilink, must provide documentation that it has enrolled and is participating in the E-Verify program to verify the work eligibility status of all newly hired employees.
7. All potential Section 5310 Grantees must accept Citilink's Transit Asset Management Plan and include in the plan any Section 5310 assets in compliance with 49 CFR Part 625.
8. All applicants receiving 5310 awards must have a completed Title VI Program Plan, procurement plan, and E-Verify documentation on file with Citilink within 90 days of being awarded their Section 5310 request. Applicants who do not have either a new or updated Title VI Program Plan, procurement policy, or E-Verify documentation on file with Citilink within 90 days can have their award rescinded. Citilink will provide all applicants with the appropriate guidance and templates to complete their Title VI Program Plan, and procurement policy, and an E-Verify Affidavit. In addition, all Section 5310 Grantees will be required to submit a Section 5310 asset list along with condition information to NIRCC and Citilink on an annual basis.

Applications that do not have the documentation requested in this section and documentation requested in the Call for Projects will not be eligible.

M. Local Match Documentation

AUTHORIZING RESOLUTION FOR NON-PROFIT ORGANIZATIONS

A resolution of (Name of Organization) recommending approval of an application to the Fort Wayne Public Transit Corporation (dba Citilink) for assistance (Federal Section 5310) in purchasing equipment to provide transportation services to seniors and individuals with disabilities within the Fort Wayne Urbanized Area.

WHEREAS, the (name of organization) is submitting request to the Fort Wayne Public Transit Corporation (dba Citilink) for assistance in funding capital and/or operational activities Brief Description of Equipment Requested.

WHEREAS, the contract for financial assistance requires that the (name of organization) obligate local funding equal to [total local match (twenty percent for eligible capital items) + (fifty percent for eligible operational items)] of the total project cost being \$(20% of Cost for Capital Projects) local match of the \$(100% of Cost of Capital Projects) total capital project cost and/or \$(50% Cost of Operational Projects) local match of \$(100% of Cost of Operational Projects) of the total operational project cost for the submitted project(s) upon execution of the funding contract

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of (name of organization) that (organization officer) is authorized to commit organization resources, to execute and file an application for and to contract on behalf of the (name of organization) with the Fort Wayne Public Transit Corporation (dba Citilink) to aid in the financing of capital equipment and/or operational activities.

(Name of President, Governing Board)

(Signature)

(Date)

N. Affirmation

AFFIRMATION OF APPLICANT'S ATTORNEY

for _____

(Name of Applicant)

As the undersigned Attorney for above named Applicant, I hereby affirm to the Applicant that it has authority under state and local law to make and comply with the certifications and assurances as indicated on the foregoing pages, I further affirm that, in my opinion, the certifications and assurances have been legally made and constitute legal and binding obligations on the Applicant.

I further affirm that, to the best of my knowledge, there is no legislation or litigation pending or imminent that might adversely affect the validity of these certifications and assurances or of the performance of the project.

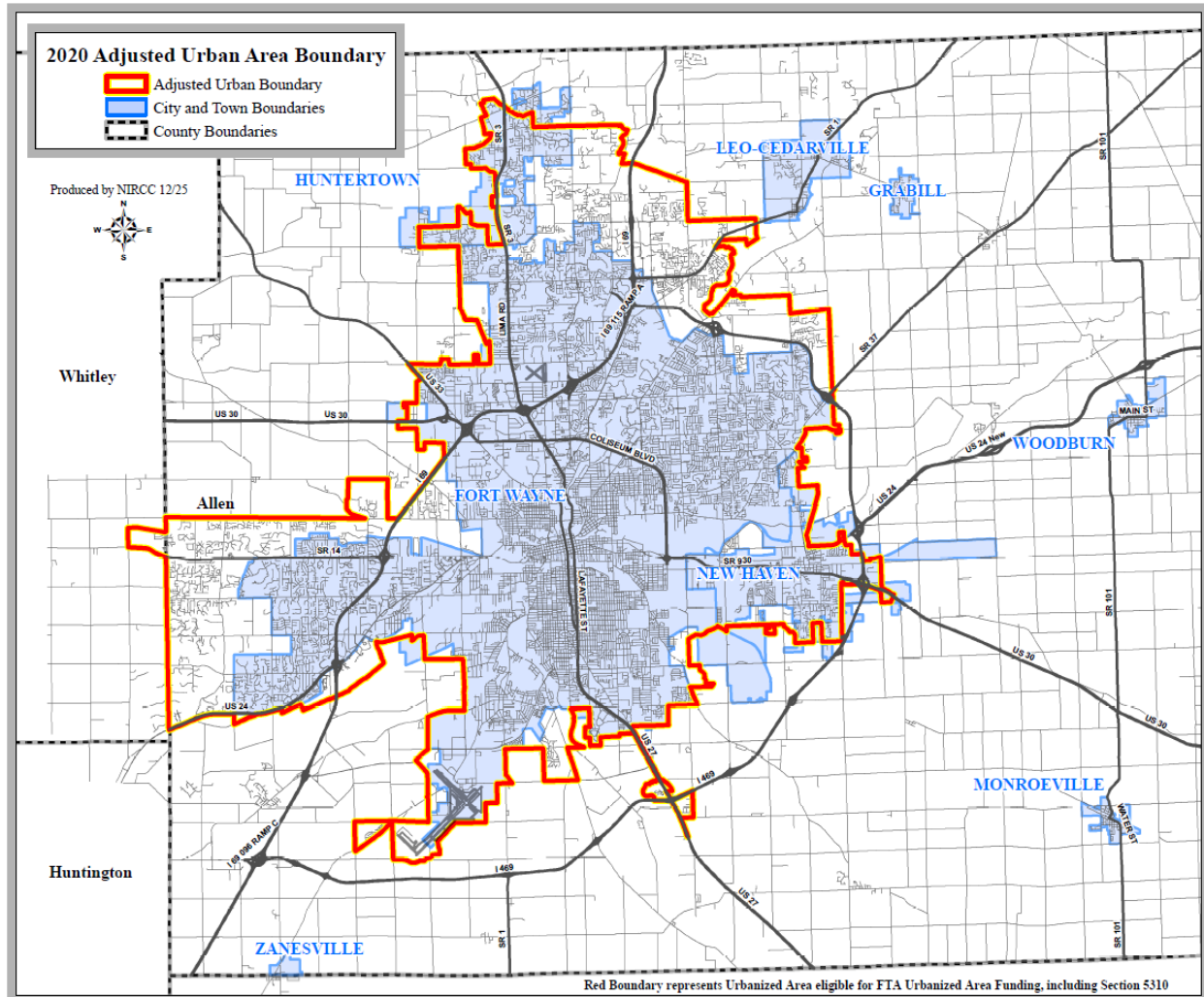
Date: _____

Applicant's Attorney Signature

Applicant's Attorney Name (PRINTED)

Unless the Applicant seeks only an FTA university and research training grant authorized by 49 U.S.C. 5312(b), the Applicant's legal counsel is required to affirm the legal capacity of the Attorney's affirmation.

Appendix A: Urbanized Area Boundary



Appendix B: Evaluation Criteria

Citilink's Planning and Development Committee will complete final determination of eligibility and scoring. The Planning and Development Committee will then make recommendations for award by Citilink's board. To be considered eligible **ALL** required documentation listed in this call for projects must be submitted with each application. Eligible applications will be scored from the criteria listed in the 5310 Operational Funding Evaluation Criteria and the 5310 Capital Funding Evaluation Criteria sections listed in Appendix B. It is recommended that the applicant review the scoring criteria listed in Appendix B of the Call for Projects to ensure that their responses can best meet the scoring criteria for the respective application(s).

5310 Operational Funding Evaluation Criteria

100 Possible Points

To receive the maximum possible points, Applicants must provide answers and documentation that is clear, complete and concise. Unclear and incomplete answers and documentation will result in lower scores

Question	Response
Does the project address at least one (1) strategy identified in the local coordinated plan?	
Does the applicant have the required local matching funds to cover the matching requirements (50% of operating expenses)?	

Applicant Experience, Project Description, Goals, and Objectives 40 Possible Points

The applicant should clearly describe their experience as a transportation provider. The applicant should clearly describe the project, identify and define the goals and objectives of the project, define the geographic area covered by the project, and explain how the project directly addresses unmet transportation needs or gaps in service to meet the Operational Funding strategies identified in the Coordinated Public Transit - Human Services Transportation Plan for Allen County (Coordinated Plan). The applicant should indicate the number of persons expected to be served from targeted populations (consistent with objectives of Section 5310 program) and the number of trips (or other units of service) expected to be provided. The project should also be consistent with the objectives of the Section 5310 grant program.

Implementation and Operations Plan

20 Possible Points

Projects seeking funds to support program operations must provide a well-defined operations plan. Projects must clearly and completely describe implementation steps, milestones, and the timeline for carrying out the project. The applicant must demonstrate an institutional capability to carry out the service delivery aspect of the project.

Project Budget

15 Possible Points

Projects submitted must include a clearly defined budget, including any anticipated project expenditures and revenues, documentation of matching funds, and documentation of other resources expected to be leveraged (including resources from other federal and state programs).

Program Effectiveness and Performance

10 Possible Points

Projects should be described in terms of appropriateness of service delivery related to the need the project proposes to address. projects should demonstrate cost-effectiveness in terms of the approach of the project. Project applications should identify clear, measurable performance measures to track effectiveness and present a plan for ongoing monitoring and evaluation of the service and the magnitude of its impacts on populations targeted by the Section 5310 Program. This plan should include, at a minimum, quarterly reporting of performance measures to Citilink.

Coordination and Program Outreach

15 Possible Points

Proposed projects should indicate an ability to coordinate with other community transportation and human services programs and describe a plan for communicating information about the project to potential users, social service providers, other transportation programs, etc.

Evaluation Criteria Scoring – Operational Funding	Maximum Points	Application Score
Applicant Experience, Project Description, Goals, & Objectives	40	
- Applicants Experience	5	
- Addressed unmet transportation needs or gaps in service to meet strategies identified in Coordinated Plan	20	
- Level of access (geographic, time, access)	5	
- Number of persons within each targeted group expected to be served	5	
- Number of trips or units of service to be delivered	5	
Implementation and Operations Plan	20	
- Well defined operations plan or implementation plan	5	
- Demonstrated operational/technical capability	5	
- Reasonableness of project timeline	5	
- Plan for continuing project over the next five years	5	
Project Budget	15	
- Project Cost Effectiveness (cost related to number of people served/trips provided)	5	
- Evidence of financial capability	5	
- Leveraging of resources from other federal and state programs	5	
Program Effectiveness and Performance	10	
- Appropriate match of service delivery to need	5	
- Plan for measuring effectiveness and performance, including steps to take if original goals not achieved	5	
Coordination and Program Outreach	15	
- Projects ability to coordinate with other community transportation and human service programs	5	
- Outreach and project education plan	10	
TOTAL POSSIBLE POINTS	100	

The bold areas are primary sections with the total section maximum score in bold. The indented (hyphenated) lines underneath the bold primary sections are subsections which max points total the max points of the bold primary section above it.

5310 Capital Funding Evaluation Criteria

1. The project proposal must meet the basic goal of the Section 5310 program and address at least one (1) of the Section 5310 strategies identified Coordinated Plan.. Briefly stated, the program goal is "to provide assistance in meeting the special transportation needs of elderly persons and persons with disabilities." Does the project proposal meet the basic goal of Section 5310 and address at least one (1) Section 5310 Capital Funding strategy? (mark the appropriate box below)

Yes	No
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2. The applicant must provide assurances that they can finance: the local matching funds; the operating costs; and the vehicle maintenance costs of the proposed program. Does the applicant show the financial capability necessary to acquire and operate the requested vehicle? (mark the appropriate box below)

Yes	No
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A negative response to either question number 1 or 2 will eliminate the proposal from the evaluation process.

Application Presentation and Completeness

5 Possible Points

Up to 5 points given for application appearance, presentation, and completeness. Factors considered include the submission requirements; appearance and presentation of the overall application; all questions are answered, and all answers are comprehensive and complete; number consistency and validity; and the inclusion of all requested supporting documentation and required documentation and signed forms

Coordination

2 Possible Points

Proven working relationship with public and private transit and paratransit providers.

2 points for documented attendance at a TAC Meeting within the last two years.

Service Coordination (using trips)

10 Possible Points

How many trips has your agency provided for other agencies in the past 24 months? Please include a list of agencies and the number of trips provided for each (if available).

Service Coordination	Maximum Points	Application Score
Under 1000	<u>0</u>	
1000 - 1999	<u>1</u>	
2000 - 2999	<u>2</u>	
3000 - 3999	<u>3</u>	
4000 - 4999	<u>4</u>	
5000 - 5999	<u>5</u>	
6000 - 6999	<u>6</u>	
7000 - 7999	<u>7</u>	

8000 - 8999	8	
9000 - 9999	9	
10000+	10	

Vehicle Utilization**21 Possible Points**

Vehicle use and ridership projections - these figures should be averages based upon the primary agency and all other participating not-for-profit agencies.

Average Number of Vehicle Service Hours Per Week (7 days)	Maximum Points	Application Score
0 - 15	1	
16 - 30	3	
31 - 45	6	
46 - 60	9	
61+	12	

Average Passenger to Capacity Ratio	Maximum Points	Application Score
0 - .25	0	
.26 - .50	3	
.51 - .75	6	
.76 - 1.0	9	

The passenger to capacity ratio represents the average number of passengers per trip divided by the seating capacity (including wheel chair spaces but not including driver's seat) of the vehicle. (Example: If the average number of passengers per trip is four in a vehicle with four wheelchair spaces and two regular passenger seats, the ratio is four passengers to six seats or a 0.67 average passenger to capacity ratio.)

Replacement Vehicles**14 Possible Points**

Replacement Vehicles	Maximum Points	Application Score
If the replacement vehicle has over 100,000 miles and is at least 4 years old	8	
If the vehicle has over 100,000 miles, is at least 4 years old, and is a Section 5310 vehicle	2	
Additional points will be awarded if the replacement vehicle has:		
- Between 150,000 – 200,000 miles	1	
- Over 200,000 miles	2	
Additional points will be awarded if the replacement vehicle is:		
- Between five (5) and ten (10) years old	1	
- Older than ten (10) years old	2	

Total Possible Points to be Scored = 52

All required documents listed in the Call for Projects must be submitted before the application deadline to be eligible.

Evaluation Criteria Scoring – Capital Funding	Maximum Points	Application Score
Application Presentation and Completeness	5	
Coordination	2	
Service Coordination (using trips)	10	
Vehicle Utilization	21	
- Average number of vehicle service hours per week (7 days)	12	
- Average passenger to capacity ratio	9	
Replacement Vehicles	14	
- If the replacement vehicle has over 100,000 miles and is at least 4 years old	8	
- If the vehicle has over 100,000 miles, is at least 4 years old, and is a Section 5310 vehicle	2	
- Additional points will be awarded if the replacement vehicle has between 150,000 - 200,000 miles (1pt) and over 200,000 miles (2pts)	2	
- Additional points will be awarded if the replacement vehicle is: between 5 and 10 years old (1pt) and older than 10 years (2pts)	2	
Total Possible Points	52	

The bold areas are primary sections with the total section maximum score in bold. The indented (hyphenated) lines underneath the bold primary sections are subsections which max points total the max points of the bold primary section above it.